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PATENT

JAN 04 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:
R. Uehara et al.

For: BUCKLE

Serial No.: 10/817,588

Filed: April 2, 2004

Examiner: Ruth C. Rodriguez

Art Unit: 3677

Conf. No.: 4919

Atty Dkt. No.: 114216-011

CERTIFICATE OF TRANSMISSION BY FACSIMILE

VIA FACSIMILE TO (571) 273-8300

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

I hereby certify that the following documents are being facsimile transmitted to the
United States Patent and Trademark Office (Fax No. 571-273-8300) on January 4, 2006.


1. Amendment Transmittal (1 pg.); and
2. Response to Office Action (5 pgs.).

Respectfully submitted,

EVEREST INTELLECTUAL PROPERTY LAW GROUP

Date: January 4, 2006

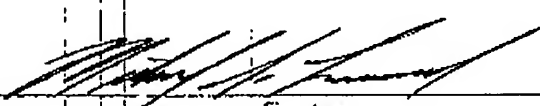
BY


Michael S. Leonard

P.O. Box 708

Northbrook, IL 60065

Phone: (847) 272-3400

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 114216-011	
Applicant(s): R. Uehara et al.						
Application No. 10/817,588	Filing Date 04/02/2004	Examiner Ruth C. Rodriguez	Customer No. 43793	Group Art Unit 3677	Confirmation No. 4919	
Invention: BUCKLE				RECEIVED CENTRAL FAX CENTER JAN 04 2006		
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	5	20	0	x \$50.00	\$0.00	
INDEP. CLAIMS	1	3	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-3189 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: 01/04/2006			
Michael S. Leonard, Reg. No. 37,557 Everest Intellectual Property Law Group P.O. Box 708 Northbrook, IL 60065 Phone: 847-272-3400 Fax: 847-272-3417			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
CC:						

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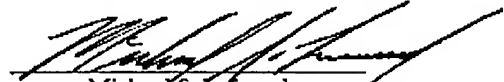
Art Unit: 3677

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2006.


Michael S. Leonard

RESPONSE TO OFFICE ACTION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This Response is submitted with in response to the non-final Office Action mailed
October 4, 2005. Applicants request amendment, reconsideration and allowance of the patent
application.

Applicants invite the Examiner to call Applicants' Representative to discuss any issues
with this application.

Listing of Claims begins on page 2 of this Response.

Remarks begin on page 4 of this Response.